



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS MATERIALS • BUREAU OF PESTICIDES MANAGEMENT
www.dec.state.ny.us

INSPECTION REPORT COVER SHEET

Inspection #: <u>081611 RF201</u>	Name of Person Contacted: <u>Michael Colwell</u>
Name of Business: <u>Colwell's Farm Markets Garden Center</u>	Official Position: <u>Owner</u>
Street Address: <u>6007 State Route 12</u>	Post Office Address: <u>6117 Solomon Rd.</u>
City/State/Zip Code: <u>Glenfield, NY 13343</u>	City/Village/Township: <u>Glenfield, NY 13343</u>
Telephone Number: <u>(315) 596-7402</u>	County: <u>Lewis</u>

Inspector's Initials	Name of Inspection Form	Form Number
<u>RF</u>	Notice of Inspection	NOI
<u>RF</u>	Pesticide Applicator/Business/Use Inspections	USE
<u>RF</u>	Worker Protection Standard Inspection	WPS
	Liquid Termiticide Use Checklist	TER
	Ornamental and Turf Checklist	T&O
	Voluntary Statement	VOL
	Receipt for Samples	SAM
	Market Place/Restricted Dealers Records Inspection	MKT
	Market Place/Restricted Dealer Records Inspection Continuation Sheet	MPC
	Quarantine Order	QRN
	Quarantine Order Release	QOR
	Experimental Use Permit Checklist	EUP
	Authorization for Medical Record Disclosure	MED

Inspector's Signature: Robert Greene Number: RF2 Date: 8/16/11

Inspection Acknowledgment: I acknowledge receiving a copy of the above listed inspection documents initialed by the inspector.

Signature: Michael J. Colwell Date: 8/16/11

Print Name: Michael J. Colwell



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☒ NOTICE OF INSPECTION

☐ USE/MISUSE INSPECTION

INSPECTION # 081611RF201	DATE August 16, 2011	TIME 1:00	AM PM	REGION 6
NAME OF INDIVIDUAL Mike Colwell		TITLE Owner		
NAME OF FIRM (Note if corporation, partnership, dba, etc.) Colwell's Farm Market + Garden Center				
ADDRESS This is the address of the: <input type="checkbox"/> INSPECTION SITE <input type="checkbox"/> FIRM <input type="checkbox"/> INDIVIDUAL 6007 State Route 12				
CITY / VILLAGE Glenfield		STATE NY	ZIP 13343	
TOWNSHIP Martinsburg	COUNTY Lewis		PHONE (315) 376-7402	

REASON FOR INSPECTION

- ☐ For the purpose of inspecting and obtaining samples of any pesticides or devices packaged, labeled and released for shipment, samples of any containers or labeling for such pesticides or devices in places where pesticides or devices are produced, or held for distribution or sale.
- ☒ For the purpose of inspecting and obtaining samples of mandated records.
- ☒ For the purpose of inspecting the use of pesticides and sampling pesticides in use to determine if they are being used in compliance with appropriate laws and rules and regulations.
- ☒ For the purpose of inspecting sites where pesticides are being used to collect data on the use of pesticides and to determine whether pesticides are being used in compliance with appropriate laws and rules and regulations.
- ☒ Other - To conduct a WPS inspection.

VIOLATION SUSPECTED

None

CONSENT USE/MISUSE

Voluntary Consent Necessary to Enter for Inspection and/or Sampling.

- ☐ The undersigned hereby voluntarily consents to an inspection of _____ of which I am the owner, Agent, or Person-in-Charge, for the purposes of gathering information and/or samples in connection with the administration and enforcement of Article 33 and Section 15-0313 of the Environmental Conservation law relating to pesticides. I understand that I have the right to refuse consent to this entry.

SIGNATURE

TITLE

DATE

This inspection is being performed under authority granted by Article 33 and Section 15-0313 of Article 15 of the Environmental Conservation law relating to pesticides and the Federal Insecticide, Fungicide and Rodenticide Act as amended (7 U.S.C. 136 et seq.).

INSPECTOR INFORMATION

NAME Robert Fiebe	TITLE PCS-1	ID NUMBER RF2	PHONE NUMBER (315) 785-2614
SIGNATURE Robert Fiebe	OFFICE LOCATION 17 Washington St. Watertown, NY 13601	ACCOMPANIED BY	



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PESTICIDE APPLICATOR/BUSINESS/USE INSPECTIONS

INSPECTION NUMBER 081611RF201		FIRM/FACILITY/PERSON INTERVIEWED Colwell's Farm / Mike Colwell		EQUIPMENT TYPE/SIZE fogger	
TYPE OF INSPECTION: <input type="checkbox"/> Business/Agency <input checked="" type="checkbox"/> Applicator <input type="checkbox"/> Non-agricultural use <input checked="" type="checkbox"/> Agricultural use		SITE OF INSPECTION 6007 St. Rt 12 Glenfield, NY			
BUSINESS REG. NO./EXPIRATION DATE NA		INSURANCE COMPANY/EXPIRATION DATE NA			

APPLICATOR NAME/CERTIFICATION TYPE	CERTIFICATION ID	CATEGORY/EXPIRATION	SUPERVISED BY
Michael Colwell Private	P6862769	23 6/21/14	NA
Violet Colwell Private	P6813163	24 12/21/15	NA

DATE/TIME/WEATHER CONDITIONS DURING APPLICATION 7/16/11 6:00 PM	CROP	SITE/SIZE	TARGET PESTS
		Greenhouse #6+4	aphids

PESTICIDE NAME/EPA REG NO.	METHOD OF APPLICATION	CLASSIFICATION	FORMULATION	LABEL RATE	OBSERVED RATE
Marathon 3125-549	fogger	restricted			3.01/1800sq ft
Endeavor 100 913	fogger	restricted			2.302/1700sq ft

LABEL/EQUIPMENT REQUIREMENTS	REFERENCE SECTION	Yes	No	NA	APPLICATOR REQUIREMENTS	REFERENCE SECTION	Yes	No	NA
Label Rate Followed	325.2(b)				Apprentices Properly Supervised	325.7(d)			✓
Target Pests on Label	325.2(b)				Apprentices Trained/Documented	325.10(a)			✓
PPE/Cautionary Labeling Followed	325.2(b)				Apprentice Variance Approved	325.10(b)			✓
Preharvest Interval/REI per Label	325.2(b)				I. D. Card in Possession During Use	325.7(a)	✓		
Crop/Area Treated per Label	325.2(b)				Label in Possession During Use	325.2(d)	✓		
Pesticide Containers Properly Labeled	33.1301(1)(b)	✓			Notification Requirements Met	33-0905(5)			✓
Service Containers Properly Labeled	33.1301(1)(b)			✓	REPORTS/RECORDS	33-1205(1)	Yes	No	NA
Containers Properly Rinsed and Disposed	325.4(a)	✓			EPA Reg. No.		✓		
Backflow Prevention/Air Gap Present	325.2(c)	✓			Product Name		✓		
Proper Stickers on Equipment/Vehicles	325.26			✓	Quantity		✓		
Equipment Properly Calibrated				✓	Date Applied		✓		
Storage Locked/Containers Secure		✓			Address				✓
Warning Signs Posted				✓	Place of Application		✓		
Location of Container Disposal: his home					Dosage Rate				✓
Location of Pesticide Storage: office					Method of Application		✓		
Water Source: onsite					Target Organism/Crop Treated		✓		
Pesticide Mixing Area: his home					Records Kept 3 Years		✓		

REMARKS: **I'll review the label requirements of the above mentioned pesticides when I return to my office. I did not inspect any of the application equipment. Mr. Colwell says he calibrates his fogger every year.**

INSPECTOR'S SIGNATURE Robert Reese	DATE AND TIME INSPECTED 8/16/11 2:30 PM
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WORKER PROTECTION STANDARD INSPECTION

Inspection # <u>081611RF201</u>	Date: <u>August 16, 2011</u>	Inspection: <input checked="" type="checkbox"/> Unannounced <input type="checkbox"/> Appointment
Firm/Farm Name <u>Calwell's Farm & Garden Center</u>	Inspection Type: Tier I <input checked="" type="checkbox"/> or Tier II <input type="checkbox"/>	
Type of Establishment: (check all applicable): <input checked="" type="checkbox"/> Farm <input checked="" type="checkbox"/> Greenhouse <input type="checkbox"/> Nursery <input type="checkbox"/> Family establishment <input type="checkbox"/> Research <input type="checkbox"/> Forest		
Approx. total area of establishment: <u>21 acres</u>	Principal crops: <u>Sweet corn, tomatoes, flowers</u>	
# of certified applicators with establishment: <u>2</u>	Name of person(s) directing/controlling pesticide use: <u>Michael Calwell</u>	
Who applies pesticides? (check all applicable): <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Employee <input type="checkbox"/> Custom Applicator		
Note: For data in this block, estimates provided by the establishment are sufficient.		
# present at this inspection:	workers <u>4</u>	handlers <u>1</u>
1. # present during last pesticide application:	workers <u>4-5</u>	handlers <u>1</u>
2. or for the last 30 days: (circle one)		
# of permanent employees:	workers <u>4</u>	handlers <u>1</u>
# of seasonal employees:	workers <u>8</u>	handlers <u>0</u>

INFORMATION AT A CENTRAL LOCATION

40 CFR 170.122/135

How to Comply Manual

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- NA ☒ Y ☐ N Is the approved SAFETY POSTER displayed? 23
- NA ☒ Y ☐ N Is EMERGENCY MEDICAL INFORMATION displayed? (name, address & telephone number) 24
- NA ☒ Y ☐ N Is the site LOCATED where it can be readily seen and read by workers & handlers? 24
- NA ☒ Y ☐ N Are workers & handlers INFORMED of the location and are they allowed ACCESS to the site? 24
- NA ☒ Y ☐ N Does the information remain LEGIBLE while posted? 24
- NA ☒ Y ☐ N Is the following APPLICATION INFORMATION displayed? -Location and Description of the treated area; - Product Name; -EPA REG #; - Active Ingredient(s) of the pesticide; -Time & Date of application; - REI (restricted entry interval) 23

Comments (explain NA): Only the owner handles pesticides. They employ up to 12 workers at various times during the season.

PESTICIDE EXPOSURE INCIDENTS/EMERGENCY ASSISTANCE

40 CFR 170.160

- How are incidents reported for employees who become sick/injured by pesticides? they report to Mr. Calwell
- NA ☒ Y ☐ N Is prompt transportation to emergency medical facility available for employees who become sick/injured by pesticides? 36
- NA ☒ Y ☐ N Is information provided to medical personnel regarding the pesticide to which employees may have been exposed? 36

Who is the person responsible for providing transportation and pesticide information? Mr. Calwell

Y ☒ N Have there been any pesticide exposure incidents on this farm? If yes, give details: _____

Comments (explain NA): _____

EMPLOYER/CUSTOM APPLICATOR INFORMATION EXCHANGE ☒ NA (no custom applications) 40 CFR 170.124 & 170.224

- NA ☒ Y ☐ N Does the ag establishment notify the custom applicator regarding the location of treated areas and REIs? 34
- NA ☒ Y ☐ N Does custom applicator notify the ag establishment of required application information before the application? 33

How is the information exchanged? When/with whom? _____

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PESTICIDE SAFETY TRAINING ASSURANCE

40 CFR 170.130

How to Comply Manual
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WORKERS: (Applies to workers who are NOT certified applicators or trained handlers)

- ☒ NA ☐ Y ☐ N Does Ag Employer ASSURE that workers have been trained within the last five years? 25
- ☒ NA ☐ Y ☐ N Does Ag Employer ASSURE that workers have been trained *before EARLY ENTRY* activities during an REI? 25
- ☒ NA ☐ Y ☐ N Is the Ag Employer able to VERIFY that the required PESTICIDE SAFETY INFORMATION was provided to workers 26
before entry into any area on an ag establishment where WPS pesticides have been applied within the last 30 days?
- ☒ NA ☐ Y ☐ N Does Ag Employer ASSURE that workers have received the required ADDITIONAL TRAINING *before the sixth* 25/26
day of entry into any area on an ag establishment where WPS pesticides have been applied within the last 30 days?

HANDLERS: (Applies to handlers who are NOT certified applicators or certified crop advisers) **40 CFR 170.230**

- ☒ NA ☐ Y ☐ N Does Ag Employer ASSURE that handlers have been trained within the last five years? 25/26
- ☒ NA ☐ Y ☐ N Does Ag Employer ASSURE that handlers have been trained *before performing any handling task?* 25/26

How is training verified for both workers and handlers? Samplers WPS forms

Comments (explain NA):

PESTICIDE SAFETY TRAINING PROGRAM ☐ NA (if workers trained elsewhere) **40 CFR 170.130/230**

- ☒ NA ☐ Y ☐ N **WORKERS & HANDLERS:** Is the information presented in a manner that the workers & handlers can understand 27
(such as through a translator & using nontechnical terms & presenter answers questions)?
- ☒ NA ☐ Y ☐ N **WORKERS:** Does the PESTICIDE SAFETY INFORMATION meet the criteria listed in 170.130(c)? 26
- ☒ NA ☐ Y ☐ N **WORKERS:** Does the content of the ADDITIONAL TRAINING materials meet the criteria listed in 170.130(d)(4)? 103
- ☒ NA ☐ Y ☐ N Is trainer qualified to train WORKERS? (certified applicator or authorized by DEC) 26
- ☒ NA ☐ Y ☐ N **HANDLERS:** Does the content of the training materials meet the criteria listed in 170.230(c)(4)? 104
- ☒ NA ☐ Y ☐ N Is the trainer qualified to train HANDLERS? (certified applicator or authorized by DEC) 26

Who trains workers/handlers? Mr. Colwell When/how often?

Comments (explain NA):

DECONTAMINATION SITES

The employer must adhere to the following decontamination requirements for **WORKERS** and **HANDLERS**: **40 CFR 170.112/150/250**

- ☒ NA ☐ Y ☐ N Do decontamination sites have soap, single-use towels, and enough water for washing & emergency eye flushing? 29-31
- ☒ NA ☐ Y ☐ N Is the decontamination water of a quality & temperature as required? 29
- ☒ NA ☐ Y ☐ N Is one pint of eye flush water immediately available to handlers using pesticides requiring protective eye wear and 31/68
to early entry workers when working in areas treated with pesticides requiring protective eye wear for early entry?
- ☒ NA ☐ Y ☐ N Is the decontamination site within 1/4 mile of the work site and out of areas being treated or under REI? 30/31
- ☒ NA ☐ Y ☐ N Are decontamination sites provided for workers entering treated areas until 30 days following expiration of the REI? 29
(Exception: Pesticides with a four-hour REI require decontamination site for only seven days.)
- ☒ NA ☐ Y ☐ N Are decontamination sites provided for early entry workers during and after early entry? 67/68

The employer must adhere to the following decontamination requirements for **HANDLERS**: **40 CFR 170.250**

- ☒ NA ☐ Y ☐ N Is enough water provided to handlers for washing the entire body in case of an emergency? 30
- ☒ NA ☐ Y ☐ N Is one clean change of clothing provided to handlers for use in an emergency? 30
- ☒ NA ☐ Y ☐ N Are decontamination supplies located at the mix/load site? 30/31
- ☒ NA ☐ Y ☐ N Are decontamination supplies for PILOTS kept in the airplane or at the aircraft loading site? 30
- ☒ NA ☐ Y ☐ N Are handler decontamination supplies kept out of treated areas unless they are in enclosed containers? 31
- ☒ NA ☐ Y ☐ N Are decontamination supplies located where handlers remove PPE for washing thoroughly after handling activities? 31

Comments (explain NA): The owner is the only handler

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ADDITIONAL DUTIES FOR WORKER EMPLOYERS

40 CFR 170.110

How to Comply Manual
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RESTRICTIONS DURING APPLICATIONS

- ☐ NA ☒ Y ☐ N Are workers prohibited in treated areas during application and until REIs have expired? 45
- ☒ NA ☐ Y ☐ N Are workers prohibited in treated areas plus the additional buffer area during application in NURSERIES? 51/52
- ☐ NA ☒ Y ☐ N Are workers prohibited in a GREENHOUSE during application and until ventilation criteria are met? 53-55

NOTICE OF APPLICATIONS TO WORKERS

40 CFR 170.120

- ☐ NA ☒ Y ☐ N Are all GREENHOUSE applications posted with WPS warning signs? 42
- ☐ NA ☒ Y ☐ N Are workers given BOTH oral and posted notification when required by the pesticide label? 41-44
- ☐ NA ☒ Y ☐ N Are workers given notification of applications (EITHER orally or posted) for other applications? 41-44
- ☐ NA ☒ Y ☐ N Are workers told which method will be routinely used at this firm (oral or posted notification)? - circle one 41

Who notifies workers? Mike C. Inc 4

- ☒ NA ☐ Y ☒ N Have any early entry activities occurred?
- ☐ NA ☒ Y ☐ N Were workers informed of label restrictions re: early entry?

Posted Warning Signs ☐ NA for all

- ☐ NA ☒ Y ☐ N Does the employer use the approved WPS warning signs for posted notification? 42/43
- ☐ NA ☒ Y ☐ N Are the signs posted at all entrances of worker entry to the treated area? 42
- ☐ NA ☒ Y ☐ N Are the signs put up no sooner than 24 hours prior to application? 43
- ☐ NA ☒ Y ☐ N Are the signs removed within three days after the end of the REI? 43
- ☒ NA ☐ Y ☐ N Are the signs posted along the border of any labor camp adjacent to the treated area? 42

Oral Warnings ☐ NA for all

- ☐ NA ☒ Y ☐ N Are oral warnings given in a language (s) understood by workers? 44
- ☐ NA ☒ Y ☐ N Do oral warnings include: 1) location & description of treated area; 2) REI; 3) instructions not to enter during the REI? 44

Comments (explain NA):

ADDITIONAL DUTIES FOR HANDLER EMPLOYERS

APPLICATION RESTRICTIONS & MONITORING

☒ NA if no handlers employed **40 CFR 170.210**

- ☐ NA ☐ Y ☐ N *Do both the employer & the handler assure that no pesticide is applied (either directly or through drift) so as to contact anyone other than trained and PPE-equipped handlers: 73
- How is this verified?
- ☐ NA ☐ Y ☐ N Are handlers monitored visually or by voice every two hours when handling SKULL & CROSSBONES pesticides? 73
- ☐ NA ☐ Y ☐ N Does the handler have a continuous visual or voice contact with another trained and PPE-equipped handler when handling a FUMIGANT in a GREENHOUSE? 73/74

SPECIFIC INSTRUCTIONS FOR HANDLERS

☐ NA if no handlers employed **40 CFR 170.232**

- ☐ NA ☐ Y ☐ N Does the employer assure that handlers read the label or are informed (in a manner they can understand) about the label requirements for safe use before performing any handling activity? 75
- ☐ NA ☐ Y ☐ N Does the handler have access to the product labeling during handling activities? 75

SAFE OPERATION OF EQUIPMENT

☐ NA if no handlers employed **40 CFR 170.234**

- ☐ NA ☐ Y ☐ N Is the handler instructed in the safe operation of handling equipment before it is used? By whom? 75
- ☐ NA ☐ Y ☐ N Is handling equipment inspected and repaired before each day of use? 77
- ☐ NA ☐ Y ☐ N Does the employer assure that only trained and PPE-equipped handlers repair, clean or adjust any handling equipment that contains pesticides or pesticide residues? 77

Comments (explain NA):

PERSONAL PROTECTIVE EQUIPMENT REQUIREMENTS FOR HANDLERS/EARLY ENTRY WORKERS**40 CFR 170.112/240**

- ☒ NA_Y_N Does the employer provide the handler/early entry workers with the appropriate PPE in clean and operating condition? 79
- ☒ NA_Y_N Does the employer assure that instruction on use and cleaning of PPE is given and that it is worn and used correctly? 79
- Who gives instructions and assures use of PPE? _____
- ☒ NA_Y_N Does the employer assure that PPE is inspected, cleaned, stored properly & repaired or replaced before each day of use? 79
- ☒ NA_Y_N Does the employer assure that filters are replaced on respirators when required? 80
- ☒ NA_Y_N Do handlers/early entry workers have a clean place to store personal clothing, put on PPE and remove PPE after use? 79
- Where is it located? _____
- ☒ NA_Y_N Is contaminated PPE disposed of properly? 79
- ☒ NA_Y_N Does the employer take appropriate measures to prevent heat-related illness for handlers/early entry workers using PPE? 79
- ☒ NA_Y_N Have handlers refused to wear proper PPE?

From labels of agricultural pesticides documented in an accompanying AUO inspection, list the following (for up to 4 products):

	Product Name	REI	PPE
1	Marathon II	12	long sleeve shirt + pants, chemical resistant gloves, shoes + socks
2	Endeavor	12	long sleeve shirt + pants, chemical resistant gloves, shoes + socks
3			
4			

If the label for any of the above products does not include agricultural use requirements - state so above.

Comments (explain NA):

WORKER AND HANDLER INTERVIEWS

- ☒ Y_N Were any workers or handlers interviewed? (circle which were) If no for either, explain why an interview was not conducted.

FAMILY ESTABLISHMENTS**40 CFR 170.104/110/112/124/224/240**

- ☒ NA_Y_N Are employees only spouse, children, stepchildren, foster children, parents, stepparents, foster parents, brothers, sisters? 91
- If NO, skip this section.
- ☒ NA_Y_N Are non-handlers prohibited in treated areas during application and until REIs have expired? 92
- ☒ NA_Y_N Are non-handlers prohibited in treated areas plus the additional buffer area during application in NURSERIES? 92
- ☒ NA_Y_N Are non-handlers prohibited in a GREENHOUSE during application and until ventilation criteria are met? 92
- ☒ NA_Y_N Are early entry workers prohibited in treated areas during the first four hours after application? 93
- ☒ NA_Y_N Are early entry workers limited to one hour of work in a 24-hour period in treated areas during the REI? 93
- ☒ NA_Y_N Are early entry workers who perform irrigation and limited contact activities limited to eight hours of work in a 24-hour period? 93
- ☒ NA_Y_N Is the correct PPE for early entry PROVIDED for early entry activities at this firm? 93
- ☒ NA_Y_N Does the handler at this firm wear the label-specified PPE during handling tasks? 92
- ☒ NA_Y_N Is the label-specified PPE for handling activities at this firm PROVIDED in clean and operating condition? 92
- ☒ NA_Y_N Does this establishment notify commercial handlers regarding location of treated areas and REIs on the establishment? 92
- ☒ NA_Y_N Do commercial handlers notify this establishment of required application information before application takes place? 92

Comments (explain NA):

Additional Comments:

Print name of inspector Robert Greese	Print name of person interviewed Mike Colwell
Signature of inspector Robert Greese	Signature of person interviewed Mike Colwell

New York State Department of Environmental Conservation

WORKER PROTECTION STANDARD
AGRICULTURAL WORKER INTERVIEW QUESTIONNAIRE - SHORT VERSION

Inspection # (if interview related to an inspection):	081611 RF201
Name of Establishment:	Colwell's Farm Market
Date of Interview:	8/16/11
# of Workers Interviewed:	1
Were Workers accompanied by employers during interview?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Interview Conducted	<input checked="" type="checkbox"/> onsite <input type="checkbox"/> offsite

PESTICIDE SAFETY TRAINING

1. Did you receive pesticide safety training? ☒ Yes ☐ No

If yes, what type of training did you receive?

☐ movie ☒ flip chart (bring a picture of a flip chart) ☒ lecture ☐ handbook

2. Was the training in your native language? ☒ Yes ☐ No

3. Where did you receive the training? at work

4. When did you receive the training? ☒ During work ☐ At lunch ☐ After work?

5. Was an interpreter available during the training? ☐ Yes ☒ No NA

6. Do you know who trained you? ☒ Yes ☐ No

If yes, who? Mike Colwell

7. When you were trained, were you taught about how to wear special clothes (PPE) such as gloves, boots, coveralls, mask) ☒ Yes ☐ No

8. When you were trained, were you taught about heat stress (eg. how to know when you've been in the heat for too long, how to avoid heat stress or what to do if you feel sick from it)? ☒ Yes ☐ No

9. (Show sample worker ID card) Were you given a card like this to show that you were trained?
☐ Yes ☒ No

10. (Show the safety poster) Where is the safety poster located? next to office door

11. (Show an example of application records) Has anyone ever showed you where these records are kept?
☒ Yes ☐ No If yes, where are they located? _____

NOTIFICATION

12. Do you know where the signs are posted about pesticides that have been used recently?
☒ Yes ☐ No

If yes, where? next to office

13. Are you told about areas that have been treated with pesticides? ☒ Yes ☐ No

How are you told? ☒ Signs ☒ Oral warning ☒ Both

14. Who tells you when you get oral warnings? Mike Colucci

Is it the same person that posts the signs? ☒ Yes ☐ No

When do they post them? prior to application

15. Are signs and oral warnings in your native language? ☒ Yes ☐ No
(Inspector note how warnings are communicated to non-English speaking workers: _____)

16. (Show warning REI sign.) Do you understand what this sign means? ☒ Yes ☐ No

If yes, do you pay attention to the warning signs and not enter or cross the fields? ☒ Yes ☐ No

17. Are you told when to stay out of treated areas? ☒ Yes ☐ No

18. Are the labels for the pesticides available for you to read? ☒ Yes ☐ No

A. Are the labels in a language you can understand? ☒ Yes ☐ No

B. Where is this information? in his office

C. Is this information always available to you? ☒ Yes ☐ No

DECONTAMINATION SUPPLIES

19. Is there yes water yes paper towels yes soap, available all day? If so, where? bathroom and water and towels in truck

Is this location more than 1/4 mile from the work site? ☐ Yes ☒ No (Inspector verify, if worker does not know.)

EARLY ENTRY

20. Have you ever entered a field or an area of a greenhouse soon after you saw a pesticide being sprayed or were you ever told to enter such an area soon after a pesticide was used? ☐ Yes ☒ No

A. If yes, were you given special clothing to wear? ☐ Yes ☐ No *NA*

B. If you did enter such an area, why? *NA*

HANDLER TASKS

21. In the past year, have you ever worked with pesticides to do any of the following?

<input checked="" type="checkbox"/> Y/N	mixing pesticides	adding to pesticide sprayers	applying pesticides to crops	repair or clean a pesticide sprayer	other activity (briefly describe)
Yes					
No	<input checked="" type="checkbox"/>				

If yes, were you trained in doing that work before you did it? ☐ Yes ☐ No

EXPOSURE INCIDENTS

22. Have you ever felt as though pesticides/poisons have made you sick after working in the fields?
☐ Yes ☒ No

If yes, what were your symptoms? _____

23. Were you ever directly sprayed/dusted by pesticides? ☐ Yes ☒ No

If yes, approximately when and how did this happen? _____

24. Do you take pesticide containers home with you? ☐ Yes ☒ No

A. If yes, what do you use them for? _____

B. Are chemicals ever in the containers? ☐ Yes ☐ No

EMERGENCY ASSISTANCE

25. Do you know where to go on your farm/greenhouse to get information about the closest hospitals/clinics (facility's name, phone number, address)? ☒ Yes ☐ No

A. Where is the information? Safety poster

B. Is this information always available? ☒ Yes ☐ No

26. Do you know who to contact on the farm/greenhouse if you have a medical emergency while working? ☒ Yes ☐ No

27. Do you know who would take you to the hospital/clinic if you were sick from pesticides? ☒ Yes ☐ No

28. How do you or the employer report pesticide-related illnesses? to Mike

RETALIATION

29. Have you ever been told to do something with pesticides on the farm (greenhouse, etc) that you thought you should not do? ☐ Yes ☒ No

30. Are you always able to do what is needed, like wear special clothing or know about pesticides used, without the employer stopping you from doing those things? ☒ Yes ☐ No

31. Have you ever complained about something relating to pesticides and your work at the farm/greenhouse and been threatened to be fired? ☐ Yes ☒ No

Attachment #3

MARATHON II GREENHOUSE AND NURSERY INSECTICIDE (NO SOIL INJECTION IN LONG ISLAND)**Product Information**

Product Name:	MARATHON II GREENHOUSE AND NURSERY INSECTICIDE (NO SOIL INJECTION IN LONG ISLAND)
EPA Registration Number:	432-1369-59807
Use:	NURSERY
Type:	INSECTICIDE
Status:	REGISTERED
Toxicity Statement:	BEEES
Signal Word:	CAUTION
Precautionary Statement:	ORAL, DERMAL & INHALATION
Flammable:	N
Formulation:	LIQUID
Restricted:	C
Renewal Date:	6/30/2012
Nassau/Suffolk Use Allowed:	SEE LABEL •
Initial Registration Date:	6/24/2005

Ingredient Information

Prefix	Active Ingredient Name	Active Ingredient Code	Percent of AI
	IMIDACLOPRID	129099	21.4

Contact Information

Manufacturer	Distributor	Payor
BAYER ENVIRONMENTAL SCIENCE 2 T.W. ALEXANDER DR. PO BOX 12014 RESEARCH TRIANGLE PARK, NC 27709	OHP INC. 5145 FOREST RUN TRACE, SUITE B ALPHARETTA, GA 30022	OHP INC. 5145 FOREST RUN TRACE, SUITE B ALPHARETTA, GA 30022

Notes:

C

NYSDEC 326.23 (e): The commissioner of the NYSDEC may place any conditions on the registration of any product that are deemed necessary to prevent damage to health, property and wildlife. Classification as 'restricted use' may be necessary. See Part 326.23 (e).

Please review the current New York State label and/or the appropriate active ingredient file in our chemical

information directory for more information relative to this product and its use on Long Island, New York.

Note: These NYS pesticide product registration data are intended for information purposes only. If you are concerned about the status of a product, please contact the NYS DEC before purchase, distribution, sale, or use. Some products may show a renewal date that has passed. These products are in the re-registration process and continue to be registered pending a re-registration decision. Information contained in the database is updated approximately every week.

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Attachment # 4

ENDEAVOR INSECTICIDE**Product Information**

Product Name:	ENDEAVOR INSECTICIDE
EPA Registration Number:	100-913
Use:	AGRICULTURAL
Type:	INSECTICIDE
Status:	REGISTERED
Toxicity Statement:	NONE
Signal Word:	CAUTION
Precautionary Statement:	DERMAL (INCLUDES EYE IRRITATIONS)
Flammable:	N
Formulation:	DISPERSIBLE GRANULES
Restricted:	G
Renewal Date:	12/31/2012
Nassau/Suffolk Use Allowed:	YES
Initial Registration Date:	1/29/2001

Ingredient Information

Prefix	Active Ingredient Name	Active Ingredient Code	Percent of AI
	PYMETROZINE	101103	50

Contact Information

Manufacturer	Distributor	Payor
SYNGENTA CROP PROTECTION, LLC PO BOX 18300 GREENSBORO, NC 27419		SYNGENTA CROP PROTECTION, LLC PO BOX 18300 GREENSBORO, NC 27419

Notes:

G

Commercial Applicators Only: Any product whose label limits use to commercial pesticide applicators only may be distributed, sold purchased, possessed, and used only upon issuance of a commercial permit or certification identification card. Label statements that limit use to commercial pesticide applicators include but are not limited to the following:

- Only for sale to and use and storage by commercial pest control operators.
- To be applied only by or under the direct supervision of Commercial applicators responsible for insect control program. See Part 326.2 (g).

Note: These NYS pesticide product registration data are intended for **information purposes** only. If you are concerned about

the status of a product, please contact the NYS DEC before purchase, distribution, sale, or use. Some products may show a renewal date that has passed. These products are in the re-registration process and continue to be registered pending a re-registration decision. Information contained in the database is updated approximately every week.

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INSPECTION #: 081611RF201

FIRM: Colwell's Farm Market & Garden Center
6007 State Route 12
Glenfield, NY 13343

CONTACT PERSON: Michael Colwell, Owner
(315) 376-7402

INSPECTION DATE: August 16, 2011

DATE OF REPORT: August 24, 2011

NARRATIVE:

On August 16, 2011, I stopped at Colwell's Farm Market & Garden Center and conducted an unannounced inspection. I introduced myself and showed my state credentials to the owner of the business, Mr. Michael Colwell. Mr. Colwell agreed to an inspection and I issued him a Notice of Inspection.

Mr. Colwell stated that his farm is about 21 acres including seven greenhouses. His primary crops are sweet corn, tomatoes, and flowers. He also grows pumpkins and other vegetables. He employs four full time employees and up to eight seasonal employees. According to him he is the only one handling pesticides. Mr. Colwell and his wife Violet Colwell are certified private applicators. Mrs. Colwell supervises his use of pesticides within the greenhouses.


I told Mr. Colwell that my primary reason for stopping in was to conduct a WPS inspection. Mr. Colwell brought me to his office in the back of the store to show me his training materials and the central location outside his office. Mr. Colwell uses an EPA approved flip chart to train his workers. He says he trains them every spring prior to them starting work. He uses a form from Gempler's to document the training. The central location was located next to the office where employee's punch their time cards each day. The information at the central location met all the requirements of the WPS.

I then inspected his application records which had all of the required information recorded. Mr. Colwell had his records for the past three years on file. I recorded the information from two applications he made on April 20, 2011 inside two of his greenhouses. I confirmed that Mr. Colwell had copies of the pesticide labels and that his pesticide containers were labeled. The pesticides used within the greenhouses were stored in the bottom drawer of a filing cabinet. The pesticides used in the fields are stored in his garage at his home down the street. I did not inspect that storage area.

The applications I inspected appeared to be in compliance with the pesticide's label directions. However, the application record for his use of Marathon II had the wrong EPA registration number recorded. I discovered this after the inspection when I was reviewing the inspection back at my office. I telephoned Mr. Colwell and asked him to read me the EPA reg. number off the bottle and he stated that the number is 432-1369-59807, which is the correct number. Mr. Colwell was using the current registered pesticide but recording the number from an older unregistered label. I warned Mr. Colwell regarding this and asked him to make the corrections to his records.

After completing my WPS interview with Mr. Colwell, I interviewed one employee. The employee confirmed that Mr. Colwell trains them every year using a flip chart. The employee also confirmed that they are given both oral and written warnings regarding the areas treated with pesticides and that the greenhouses are posted with REI signs. The employee stated that they have decontamination supplies in the bathroom and in their trucks if in the fields. The worker interview did not reveal any violations of the WPS requirements.

Colwell's Farm Market & Garden Center appeared to be in compliance with the Worker Protection Standard. Their use of pesticides also appeared to be in compliance with New York State's pesticide laws except for the one minor record keeping error that has been corrected. No further action will be taken at this time.


Robert Freese
PCS-I, Region 6